PART B - FEE(S) TRANSMITTAL

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APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TO9	ATTORNEY DOCKET NO.	
10/034,523 TITLE OF INVENTION SPACE		HOD FOR HIBRARC	Lames H. Km fma		ARC9200100891/S1	CONFIRMATION NO. 1662 SCALE
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	T parry nim.
nonprovisional	NO	\$1400	\$300	\$0	\$1700	10/12/2006
EXAMI	NER	ART UNIT	CLASS-SUBCLASS		21.700	10/12/2009
STORK, I	CYLBR	2178	707-500000			*** **********************************
"Fee Address" indic PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AN	ndence address (or Cher /122) attached. ration (or "Fee Address"? or more recent) attached TO RESIDENCE DATA	ige of Correspondence Indication form d. Use of a Customer TO BE PRINTED ON	(1) the names of user agents OR, altern (2) the name of a singuistered attorney 2 registered patent listed, no name will THE PATENT (print or	ingle firm (having as a n or agent) and the names attorneys or agents. If no be printed.	nember a 2 of up to name is 3	MCSWAIN
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